PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/519,914			Filing Date 01/03/2005		To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY			OR		HER THAN ALL ENTITY	
FOR			NUMBER FI	.ED	NUMBER EX	IBER EXTRA		RATE (\$)	FEE (\$)	П	RATE (\$)	FEE (\$)	
BASIC FEE (37 CFR 1.16(a), (b), or (c))			N/A		N/A	N/A		N/A]	N/A		
SEARCH FEE (37 CFR 1.16(k), (i), or (m))			N/A		N/A			N/A]	N/A		
EXAMINATION FEE (37 CFR 1.16(a), (p), or (q))			N/A		N/A			N/A			N/A		
	TAL CLAIMS CFR 1.16(i))		mir	us 20 = *			П	x \$ =		OR	x s =		
INDEPENDENT CLAIMS (37 CFR 1.16(h))			m	inus 3 = *				x \$ =		1	x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE is	f the specifical sheets of pap is \$250 (\$125 additional 50 is U.S.C. 41(cation size for tity) for each ction thereo	ee due n f. See								
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))							П			1			
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL		1	TOTAL		
APPLICATION AS AMENDED – PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY													
AMENDMENT	12/11/2008	CLAIMS REMAININ AFTER AMENDME		HIGHEST NUMBER PREVIOUSI PAID FOR		SENT		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	· 3	Minus	 20	= 0		П	x \$ =		OR	X \$52=	0	
	Independent (37 CFR 1.16(h))	• 1	Minus	···7	= 0		П	x \$ =		OR	X \$220=	0	
M	Application Size Fee (37 CFR 1.16(s))						П						
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
(Column 1) (Column 2) (Column 3)													
L		CLAIMS REMAININ AFTER AMENDME	1G	HIGHEST NUMBER PREVIOUS PAID FOR	R PRE	SENT TRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
Z.	Total (37 CFR 1,16(i))		Minus	**	=		П	x \$ =		OR	x \$ =		
AMENDMENT	Independent (37 CFR 1,16(h))		Minus	***	-		П	x \$ =		OR	x s =		
Ш	Application Size Fee (37 CFR 1.16(s))					П]				
ΑN	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
** 11	" If the entry in column 1 is less than the entry in column 2, write "0" in column 3. " If the "Highest Number Previously Paid For "N THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For "N THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For "(Total or independent) is the highest number found in the appropriate box in column 1.												

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